PATENT APPLICATION : EE DETERMINATION RECO Effective October 1, 2000 CLAIMS AS FILED - PART I (Column 1) (Column 2)								Application or Docket Number 09/762380					
								SMALL ENTITY TYPE		OTHER THAI			1
TOTAL CLAIMS								RATE	FEE	7	RATE	FEE	1
F	OR	NUMBER	RFILED	NUMBER EXTRA			BASIC FE	E (BASIC FEE		1	
T	OTAL CHARGE	ABLE CLAIMS	5 / minus 20=		.31			X\$ 9=	1	1	2/2/2		1
N	DEPENDENT (CLAIMS	12 m	ninus 3 =	. 9				-	OR		1800	┨
M	ULTIPLE DEPE	NDENT CLAIM F						X40=	 	OR	X80=	120	Į
If the difference is not weather the								+135=		OR	+270=	210	
If the difference in column 1 is less than zero, enter "0" in column 2							•	TOTAL		OR	TOTAL	3650	1
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	,	RATE	ADDI- TIONAL FEE	7	RATE	ADDI- TIONAL FEE	9
	Total	.5/.	Minus	1.51		=		X\$ 9=		OR	X\$18=		Des
AME	Independent	1.18	Minus	12	2_	=	ı	X40=		OR	X80=		1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												\$
							L	+135=-		OR	+270=		
		(Calumn 4)	e - 1	in .	.2		A	TOTAL NDOIT. FEE		OR	TOTAL ADDIT. FEE	7	AVGIIGIDIO
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGH NUME PREVIO PAID I	EST BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	19 CC
	Total	.31	Minus	.51		=		X\$ 9=		OR	X\$18=		Copy
	Independent FIRST PRESE	NTATION OF MI	Minus	••• /	CLAIM	7		X40=		OR	X80=		
				LITOLITY	ODAIN			+135=-	,	OR-	+270=		
	<u> </u>							TOTAL DOIT, FEE		OR	TOTAL ODIT, FEE		
		(Column 1)		(Colum	n 2)	(Column 3)	^	UUII. FEE 1	-	,	IDDII. FEE		
		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.51	Minus	5	1	=		X\$ 9=		OR	X\$18=		
	Independent	. 17	Minus	••• /	2	•	f	X40=			X80=		
_	HIRST PRESE	NTATION OF MU	ILTIPLE DEP	PENDENT	CLAIM		H	+135=		OR	+270=		
1	the entry in colum	nn 1 is less than th	entry in colum	nn 2, write 1	or in colu	imn 3.	L	TOTAL		OR			•
	i the Thichest Nur	nber Previously Pa nber Previously Pa	ld For IN THIS	REPACE	lace than	S color #2 #		DIT. FEE		OR A	TOTAL DOIT, FEE		
1	IN THENSE NUM	ber Previously Palo	FOF (Total or	independen	t) is the	highest number f	iounc	f in the appr	opriate box	in colu	กก 1.	- 1	

FORM PTO-075 (Rev. 8/00)